

Healthy Communications



Its here! Its here! The new Refill Pharmacy is here!!!

Well as you can imagine, we are very excited to tell you we relocated the satellite pharmacy from Bldg 1680 to its new location in Bldg 1948 (the old Scotty's) across from the James Gym on Winters Street.

In an effort to improve patient safety, we are using this moving opportunity to add new computer technology to the refill prescription filling process. This new system adds to safety by employing bar code scanning controls to drive pharmacy workflow and ensure system accuracy.

Our new refill pharmacy has doubled our storage capabilities for medications, which should reduce the number of out of stock items and inconvenience to our patients. The new refill pharmacy also features a patient counseling room and has new entrance to the building that is wheel chair accessible.

But wait, there is more! For added convenience, we are installing a drive—thru system, which will be completed this fall. This will consist of two kiosks equipped with two-way video systems that will allow you to pick up your phoned-in prescription refills (not to be used for bulk or liquid prescriptions), without leaving your car.

Reminder—If you are a designated Patient Representative and are picking up a prescription, you must have a valid photo ID card of yourself, copy of the patient's military ID card (front and back), and a signed statement from the patient authorizing you to act on their behalf. This will apply if you are picking up the prescriptions inside the pharmacy or via the drive-thru. In the last issue of Healthy Communications, there was a card to cut out and use, or you may obtain a card at the Main Pharmacy.

Would you like to receive this newsletter by email, instead of hard copy by mail? If so, please send an email to lisa.carducci@medgrp.scott.af.mil

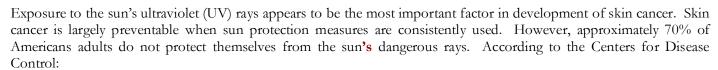
Trying to catch some rays this summer?

Studies have shown that too much sun exposure can lead to skin cancer, including malignant melanoma-the most serious form of skin cancer. The possibility of developing skin cancer is something that everyone must face, especially those

who work outdoors or have relatively pale skin. The bad news about skin cancer is that it can be fatal. The good news is that, if caught early, it is entirely treatable.

Although anyone can get skin cancer, people with certain characteristics are at greater risk.

- Fair to light skin complexion
- Family history of skin cancer
- Personal history of skin cancer
- Chronic exposure to the sun
- Atypical moles
- History of sunburns early in life
- A large number of moles
- Freckles (can indicate sun sensitivity and sun damage)



- Only 30% of adults sought shade
- Only 28% wore protective clothing when exposed to the sunlight
- Only 32% routinely used sunscreen lotion

What if it is skin cancer? By knowing the signs of skin cancer, you can be sure that they are treated at the earliest, most curable stage. Look for such changes as:

- A mole or birthmark that changes sizes, shape or texture.
- A patch or spot that is smooth, shiny or waxy and appears nearly translucent, tan, brown, black, red, pink or multicolored.
- A spot or mole that itches, crusts or bleeds.
- A sore that lasts for more than four weeks.
- A scaly crusty bump that produces a pricking or tender sensation.

Dermatology suggests these preventions:

- Avoid exposure between 10 am and 2 pm
- Wear protective clothing (such as long sleeves and a hat)
- Apply and <u>re-apply</u> sunscreen of at least 15 SPF or higher
- Avoid tanning salons

Until August 1999, the American Academy of Pediatrics recommended against using any type of sunscreen on babies younger than 6 months. PABA, an ingredient in many sunscreens, was thought to irritate a babies' sensitive skin. But the AAP now says that no evidence shows that using sunscreen on small areas of a baby's skin is harmful, and it is safe to use sunscreen on babies under 6 months if adequate clothing and shade aren't available. For all babies, the AAP recommends protecting your little ones with brimmed hats and waterproof sunscreens with an SPF of 15 or higher. You should always apply sunscreen at least 20 minutes before sun exposure, for it to seep in, and reapply it after your baby has played in the water—even if the sunscreen is waterproof.

Follow these steps and you'll greatly reduce your chances of skin cancer. Live healthy!



Are you ready for the heat?



How hot is it? If you have ever watched the weather forecast in the summer, you already know there is more to the heat than just air temperature. What matters is how hot it feels to you when you are in it. Fortunately, most meteorologists report the apparent heat, often called the heat index or the heat stress index, as part of their weather reports.

What determines the heat index?

It is combined effects of the air temperature and relative humidity. Increase in either temperature or humidity raises the heat index. Let's say it is 90°F and the humidity is at 30%—the heat index will also be 90°. However, when the humidity reaches 50%, the heat index rises to 96° and, this same air temperature feels like 113°! The higher the heat index, the greater your risk of heat-related illnesses.

To keep cool in the heat you should:

- * Reduce or eliminate strenuous activities or reschedule for coolest time of day.
- * Dress in lightweight, light-colored clothes to reflect the sunlight and help your body maintain normal temperature.
- * Drink water frequently. Sweating is one of the ways your body cools itself down and results in water loss. The only way to replace the loss (and help your body continue to cool itself) is to drink water frequently. Ideally, you should drink at least 8 ounces of water every 20-30 minutes while being active in a hot environment.

Excess heat can place an abnormal stress on your body. When your body temperature rises even a few degrees above normal (which is about 98.6), you can experience muscle cramps, become weak, disoriented, and dangerously ill unless you can help your body cool down. If your body temperature rises above 105 degrees, your condition can be fatal.



What To Do When You Get Overheated:

For heat cramps, heat fatigue, and heat syncope (fainting), ceasing the activity that precipitated the symptoms and moving to a cooler environment are often sufficient. Nevertheless, particularly if you have other medical conditions, you should contact your physician for advice. Do not treat these symptoms lightly.

Heat exhaustion, though not as serious as heat stroke, is a significant medical problem that requires immediate medical intervention. Untreated, heat exhaustion can progress to heat stroke. In the meantime, take action by moving the victim (or yourself) to a cooler place and help him/her lie down, give water or juice, and soak him/her with cool wet cloths. Again, do not delay getting medical attention, particularly if their symptoms progress.

Don't Forget the Little Ones!

Heat stroke is a life-threatening condition that occurs when a baby becomes extremely overheated, with a temperature rising above 104°. Heat stroke can come on quickly in babies, not only after prolonged sun exposure, but also during long rides in a closed vehicle or as a result of being dressed too warmly. In addition to high temperature, other symptoms include:

- * Hot, Red, Dry (no sweating) Skin
- Lethargy/Diminished Level of Response
- * Restlessness

- * Rapid Pulse
- * Poor Feeding
- * Irritability
- Vomiting
- * Rapid Breathing
- * Dehydration (no tears when baby cries & diminished urine output

If you suspect your baby has heat stroke, you need to bring your baby's internal temperature down as quickly as possible. Time is of the essence—a child suffering from severe heat stroke can easily slip into unconsciousness. Undress your baby and sponge down his/her body completely with a washcloth dipped in cool (not cold) water. Then call 911 and continue sponging off the baby until help arrives. Talk to your baby reassuringly—comfort and keep the baby calm. Though you may be tempted to give your baby acetaminophen (Tylenol), it won't lower a temperature caused by heat stroke.







They're out for blood! They turn the unsuspecting into a "happy meal," and the most likely targets are active, outdoor types. They spit on their prey, stick them with daggers, sip their blood, and then happily split the scene. However, entomology experts describe them with words like "ingenious" and "impressive.

Who are they? They are mosquitoes--those nasty little bloodsuckers who have been "needling" us for eons! Every year, just about the time we're able to enjoy the outdoor weather, mosquitoes are out in full force. But what do we really know about mosquitoes?

First of all, males don't bite, so let's take a closer look at the dreaded female mosquito. The saliva of female mosquitoes contains a substance that numbs the skin they've

targeted, which allows them to do their dirty work and depart unnoticed. The saliva also contains an anticoagulant to keep the blood flowing freely while they drink. The female mosquito places her tube-like proboscis against the skin and sticks the skin with it, injecting the saliva and inserting a cluster of dagger-like stylets through the skin and directly into a blood vessel. The female mosquito then draws up blood through a tube—which is basically a perfect syringe. She sips blood until full, expanding a special second stomach just for blood which can hold up to 1 ½ times the mosquito's weight. The female mosquito leaves behind just enough protein-laced saliva to cause an allergic reaction, which accounts for the maddening itchy welt. Then she splits, humming merrily along, tummy full.

Interesting description, but there is more you should know! In the past, mosquitoes have primarily been considered a nuisance in the Scott AFB area, but you should be aware that mosquitoes can pose a potential health threat! One of the recent concerns is the West Nile Virus (WNV), which is an infection of the brain or spinal cord, and mosquitoes are carriers of this disease. A number of crows infected with WNV have been discovered in the local area, which alerts us to the potential for WNV. Most infections are mild (less than 1 percent of people infected with WNV will develop a serious illness), but don't take any chances. Report symptoms of fever, headache, body aches, skin rash, or swollen glands to your doctor immediately.

What should you do to protect yourself so you can still enjoy the outdoors? Any commercially available insect repellant such as OFF or CUTTER will help protect you, but these products will work only if you wear them. As you go about your outside activities this summer and fall, the use of insect repellant should be the rule, not the exception. Also, try to avoid outdoor activities immediately before and after dusk when the mosquitoes are most active! Finally, do your part to eliminate mosquito habitats by keeping grass and weeds well trimmed. Eliminate breeding areas, such as containers with standing water or vessels where water can accumulate. So, be aware of the potential health risks posed by these pesky critters and take precautions to protect yourself and your family from them, and you can continue that active, outdoor lifestyle you enjoy.

Snakes

Most snakes are not poisonous. A few exceptions include the rattlesnake, coral snake, water moccasin and copperhead. Most poisonous snakes have slit-like eyes and their heads are triangular with a depression or pit midway between the eyes and nostrils on both sides of the head. Some nonpoisonous snakes, however, also have slit-like eyes.

Other characteristics unique to certain poisonous snakes:

- ✓ Rattlesnakes make a rattling sound by shaking the rings at the end of their tail.
- ✓ Water moccasins have a white, cottony lining in their mouth.
- ✓ Coral snakes have red, yellow and black rings along the length of their bodies.

To reduce your risk of snakebites, avoid picking up or playing with any snake unless you're properly trained. The best rule of all is, "If it is not your snake, don't pet it." Most people bitten by snakes bring it upon themselves by playing with these unpredictable and mostly shy reptiles.

If you're bitten by a snake, don't try to capture it. If bitten on the arm or leg, immobilize the injured area. Don't cut the wound or attempt to remove the venom—Seek medical attention as soon as possible, especially if the bitten area changes color, begins to swell, or is painful. Bites from even small shakes can prove fatal, so medical care is vital to survival.



Ticks



Some ticks transmit bacteria that cause illnesses such as Lyme disease or Rocky Mountain spotted fever. Your risk of contracting one of these diseases depends on what part of the United States you live in, how much time you spend in wooded areas, and how well your protect yourself.

If you've been bitten by a tick, remove the tick promptly and carefully. Use only sharply pointed tweezers, carefully grasp the tick as near its head as possible, and slowly remove the whole tick. Try not to squeeze the tick since this will only push the contents back into your body, increasing the chance for transmission of disease. Wash your hands after handling the tick and apply antiseptic to the bite area. (Keeping the tick in a plastic bag or small bottle for possible identification is often a good idea.)

See your doctor if you develop: ✓ Rash ✓ Fever ✓ Muscle Aches ✓ Joint Pain & Swelling

Spiders

Only a few spiders are dangerous to humans. Two of those are the black widow and the brown recluse. Both prefer warm climates and dark, dry places where flies are plentiful. They often live in dry, littered and undisturbed areas, such as closets, woodpiles and under sinks.

Black Widow Spider

The female black widow gives the more serious bite—a bite that can be lethal to a young child. You can identify this spider by the red hourglass marking on its belly. The bite feels like a pinprick, and you may not even know you've been bitten. At first, you may notice only slight swelling and faint red marks. Within a few hours, though, intense pain and stiffness begin.

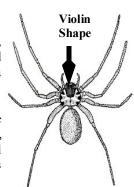
Other signs and symptoms include:

✓ Chills ✓ Fever ✓ Nausea ✓ Severe Abdominal Pain

Brown Recluse Spider

You can identify this spider by the violin-shape marking on its top. Its bite produces a mild stinging, followed by local redness and intense pain within 8 hours. A fluid-filled blister forms at the site and then sloughs off to leave a deep, growing ulcer. Reactions vary from a mild fever and rash to nausea and listlessness. On rare occasions, death results.

If bitten by a spider, clean the site well with soap and water. Apply a cool compress over the bite location and keep the affected limb elevated to about heart level. Aspirin or acetaminophen (Tylenol, others) may be used to relieve minor symptoms in adults. Don't give aspirin to children. Instead administer children acetaminophen. Treatment in a medical facility may be necessary for children less than 6 years old and for adults with severe symptoms.



Red

Hour

If bitten, make a positive identification that it was a brown recluse or black widow spider by catching the spider in a jar or other container. If the bite is on the arm or a leg, place a snug bandage above the bite to help slow or halt the venom's spread. Ensure that the bandage is tight enough to slow the flow of blood at skin level, but not so tight as to cut off circulation in the arm or the leg. Apply a cloth dampened with cold water or filled with ice and seek immediate medical attention.

While there are other spiders that bite, the two mentioned here are the most serious. Other spiders can have painful bites, but have few serious side effects. Within the past year, our hospital has seen 60 patients as a result of spider bites. None have been fatal, but all needed medical attention.



Help give the gift of life through the Scott Blood Program. We will be in Bldg 1930, Rockwell Room (adjacent to Pronto's Pizza)

July 10th, August 14th, September 11th 9:00 am - 6:00 pm

TRICARE Prime Portability

TRICARE Prime Portability allows you to continue your TRICARE PRIME coverage during a permanent or temporary (at least 30 days) move to another TRICARE region where TRICARE is available.

Steps for Moving:

- 1. Do not dis-enroll from TRICARE Prime when leaving your current location.
- 2. Once you get to your new region, contact your new TRICARE contractor by visiting a TRICARE Service Center or attending a newcomer orientation. You will transfer your enrollment by completing a new enrollment form/application in the new region.
- 3. The TRICARE contractor for your new location will coordinate the enrollment transfer upon receipt of your enrollment application.
- 4. Update your DEERS info by calling 1-800-538-9552, or online at http://www.tricare.osd.mil/deers

If you transfer from one contractor's region to another, your new TRICARE contractor is immediately responsible for your care upon receipt of a correctly completed enrollment application.

You may be asked to pay additional out-of-pocket expenses for pharmacy services until your enrollment in the new region has been successfully processed. Your TRICARE Service Center will help you file claims for reimbursement for these our-of-pocket expenses.

Obtaining Health Care During Your Move

You may maintain your TRICARE Prime enrollment while in transition. All procedures for obtaining referral authorizations will continue to apply during your move. If you need urgent care while traveling to your new location, contact a Health Care Finder by calling 1-800-941-4501. Emergency care requires no referral authorization. In an emergency, go to the nearest emergency room, *not Urgent Care Center for treatment*, and then contact your Primary Care Manager within 24 hours to report the emergency situation. This will help your claims get processed appropriately.



Recalling All Borrowed Equipment!

If you have borrowed crutches, canes, or any other type of equipment from the Physical Therapy and Occupational Therapy Clinics, please return these items so that others can benefit. If you have questions, please contact MSgt Swanson at 256-7509.

OUTDOOR SAFETY TIPS



Finally going on the weekend backpacking trip with your friends and family? Is this your first time? How much time did you spend planning and gathering and organizing your gear, equipment and food? The following tips might help prevent your adventure from turning into a disaster!

- ✓ Leave trip information with relatives or friends:
 - Where you're going and when you're returning
 - Names and addresses of people going on the trip
 - Vehicle type, color, and license number
- ✓ Don't go backpacking alone: Go in a group of at least three—if one of you gets ill or injured, someone can stay with him/her while the others go for help
- ✓ Plan your route carefully, carry a map and compass, and know how to use them
- ✓ Adjust your travel time according to terrain and slowest member of your party
- ✓ Allow for more time on the return leg of your trip
- ✓ Get a weather report, but be prepared for unexpected weather changes especially in the fall and spring
- ✓ Do not depend on other members of your party to have what you need--go properly clothed and equipped
- ✓ Carry the 10 essentials and be familiar with their use:
 - First Aid Kit
 - Matches
 - Flashlight
 - Map

- Extra clothing, food & water
- Fire starter
- Knife
- Compass

✓ IF YOU GET LOST, STAY PUT!

Attention Parents!



School is out, but will be back in session before you know it. Don't wait to get your child's school physical. We are in the middle of changing staff and appointments are filling up quick. Also, don't forget to bring your child's shot record to every doctor's visit. Be wise & immunize!

Quick Reference Phone Numbers

*	Beneficiary Counseling & Assistance 256 - 7606	*	Hospital Information (618) 256 - 7500 <i>or</i> DSN 576 - 7500	*	Pharmacy - Main 256 - 7371
*	Debt Collection Assistance Officer 256 - 7699	*	Internal Medicine Clinic 256 - 7585	*	Pharmacy - Mail-in 1 - 800 - 903 - 4680
*	Dental Clinic 256 - 1846/3321	*	Life Skills Support Center 256 - 7386/6277	*	Pharmacy - Phone In Refill 256 - 7400
☆	Family Practice Clinic 256 - 7311 / 7312 / 7647 / 3160	*	Managed Care 256 - 7700	☆	Primary Care Clinic (Advice Line) 256 - 7365
×	Flight Medicine Clinic (Advice Line) 256 - 7426	*	Pathology (Lab) 256 - 7465	÷	Primary Care Clinic (Appointments) 256 - 7364
*	Flight Medicine Clinic (Appointments) 256 - 7425	*	Patient Administration 256 - 7522	*	Referral/Case Management 256 - 7521
*	Health & Awareness Center HAWC 256 - 7139	☆	Pediatric Clinic (Advice Line) 256 - 7565	¢	TRICARE Claims Office 1 - 800 - 493 - 1613

★ Pediatric Clinic (Appointments)

256 - 7566

★ Health Care Information Line (HCIL)

1 - 800 - 941 - 4501, option 3

For more information, please access the Med Group website at:

★ TRICARE Service Center

1-800-941-4501

https://hospital.scott.af.mil